

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND										
1 Date of Request: <u>1/14/05</u>		2 Serial/Patent # <u>09/376,317</u>								
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED							
	Filing		6 AMOUNT \$							
	Amendment		\$							
	Extension of Time		\$							
	Notice of Appeal/Appeal		\$							
<input checked="" type="checkbox"/>	Petition		12/7/04 \$ 1370							
	Issue		\$							
	Cert of Correction/Terminal Disc.		\$							
	Maintenance		\$							
	Assignment		\$							
	Other		\$							
		7 TOTAL AMOUNT OF REFUND \$ 1370								
		8 TO BE REFUNDED BY:								
		<input type="checkbox"/> Treasury Check								
		<input checked="" type="checkbox"/> Credit Deposit A/C #:								
		9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"> <tr> <td style="width: 20px;">1</td> <td style="width: 20px;">3</td> <td style="width: 20px;">--</td> <td style="width: 20px;">2</td> <td style="width: 20px;">5</td> <td style="width: 20px;">4</td> <td style="width: 20px;">6</td> </tr> </table>		1	3	--	2	5	4	6
1	3	--	2	5	4	6				
10 REASON:										
	Overpayment									
<input checked="" type="checkbox"/>	Duplicate Payment									
	No Fee Due (Explanation):									
11 REFUND REQUESTED BY:										
TYPED/PRINTED NAME: <u>CHARLENA GRANT</u>		TITLE: <u>Attorney</u>								
SIGNATURE: <u>C. Grant</u>		PHONE: <u>X2-3215</u>								
OFFICE: <u>Puerto Rico</u>										
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****										
APPROVED: <u>Alisa Kelly</u>		DATE: <u>1/18/05</u>								

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**